

● PRINTER RUSH ●

(PTO ASSISTANCE)

IFW

Application : <u>09/607553</u>	Examiner : <u>Edelman, B</u>	GAU : <u>2153</u>
From : <u>S. G. C.</u>	Location : <u>IDC</u> FMF FDC	Date : _____
Tracking # : <u>06048943</u>		Week Date : <u>12-06-09</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input checked="" type="checkbox"/> <u>312</u> ^{re} <u>claims</u>	<u>10-12-2004</u>	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Improper Dependency: claims 22 and 23 depend
upon cancelled claim 21, as per examiner's amendment dated 10/12/09
Please Resolve
Thank You
aga

[XRUSH] RESPONSE: _____

INITIALS: _____

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
 REV 10/04